

State of Montana
BOARD OF PLUMBERS
301 South Park Ave
PO Box 200513
Helena MT 59620
(406) 841-2339 or (406) 841-2329
Email: dlibsdplu@mt.gov
www.plumber.mt.gov

MEDICAL GAS RENEWAL APPLICATION

NAME: _____

ADDRESS: _____

Is this a change of address? Yes ___ No ___

Your Montana Medical Gas Endorsement will expire on September 1.

Renewal Fee \$20.00 Late Renewal Postmarked after September 1 \$40.00

Incomplete or unsigned renewal applications will not be processed and will be returned. It is unlawful for a person who refuses or fails to pay the renewal fee to install Medical Gas in this state.

In order to renew your license:

- 1) Answer the disciplinary question.
- 2) Sign the renewal application.
- 3) **Attach a copy of your current Medical Gas Piping Certification**
- 4) Submit a check or money order in the amount indicated above, made payable to the Montana Board of Plumbers.
- 5) If the renewal is postmarked after Sept. 1, the license will be in a lapsed status for 45 days. After the 45 days, the license will expire and the licensee is considered to be practicing without a license. The license can be reactivated for up to 2 years following the date of renewal, but all renewal and late fees are to be paid.

Yes ___ No ___ Have any legal or disciplinary actions been instituted against you since your last renewal? If so, please attach copies of the document that initiated each action and all final orders. 37-1-105, MCA, requires that you report this information. Failure to accurately furnish the information is grounds for denial or revocation of your license.

Your Signature: _____ Date: _____